

Certificate of Facsimile Transmission
I hereby certify that this correspondence is being facsimile transmitted to
the Patent and Trademark Office, (571) 273-8300,

Docket No. SHE0065.00

on October 20, 2006 by Anna TranSigned 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Antoni KOZLOWSKI, *et al.*

Examiner: Duc TRUONG

Serial No.: ~~10/750,966~~ 10/750 996 T.W. Art Unit: 1711

Filed: December 31, 2003

Title: **MALEAMIC ACID POLYMER DERIVATIVES AND
THEIR BIOCONJUGATES**

REPLY TO RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

This Reply to Restriction Requirement is being submitted in response to the Office communication mailed on September 28, 2006, which required restriction of the claims in the above-identified application. As this Reply is being filed within the one-month shortened statutory period, no extension fees are due.

(This space intentionally left blank.)

NEKTAR™**RECEIVED
CENTRAL FAX CENTER****OCT 20 2006**

150 INDUSTRIAL ROAD
SAN CARLOS, CA 94070-6256
650-631-3100 • 650-631-3125 FAX

FACSIMILE TRANSMITTAL SHEET

TO: EXAMINER DUC TRUONG FROM: MARK A. WILSON

COMPANY: UNITED STATES PATENT OFFICE PHONE NUMBER: 650-631-3100
GROUP ART UNIT: 1711

FAX NUMBER: 1-571-273-8300 FAX NUMBER: 650-620-6395

PHONE NUMBER: DATE: October 20, 2006

RE: U.S. PATENT APPLICATION NO. 10/750,996, FILED 12/31/2003
FIRST INVENTOR: ANTONI KOZLOWSKI

ENCLOSED:

TRANSMITTAL, PTO SB21

REPLY TO RESTRICTION REQUIREMENT (3 PAGES)

AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT NO. 500348 FOR ALL FEES

TOTAL NO. OF PAGES INCLUDING COVER:

☐ URGENT ☒ FOR REVIEW ☒ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:**NOTICE OF CONFIDENTIALITY**

This transmission is intended only for the use of the Addressee and may contain information that is:
1. Subject to attorney/client privilege; 2. Attorney work product; or 3. Confidential. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of the information contained in this facsimile is strictly unauthorized and prohibited. If you have received this facsimile in error, please notify us immediately by collect phone to the sender named above.

PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/750,966-10/750,996 T.W.
Filing Date	December 31, 2003
First Named Inventor	ANTONI KOZLOWSKI
Art Unit	1711
Examiner Name	Duc TRUONG
Attorney Docket Number	SHE0065.00

RECEIVED
CENTRAL FAX CENTER
OCT 20 2006
ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Transmittal
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Nektar Therapeutics		
Signature	<i>Mark A. Wilson</i>		
Printed name	Mark A. Wilson		
Date	October 20, 2006	Reg. No.	43,275

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>Anna Tran</i>		
Typed or printed name	Anna Tran	Date	10/20/2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.